

AMERICAN INTELLIGENCE.

ORIGINAL COMMUNICATIONS.

Removal of Toe Nail under the influence of Chloroform. By W. W. VALK, M.D.—At page 271 of the *American Journal of the Medical Sciences* for the first quarter of the present year, we notice a new process for the removal of toe nail, by Mons. Long, Surgeon to the Civil Hospital of Toulon. The operation, as practised by this gentleman, is said to be of easy execution, quick, and but slightly painful, requires no preparation, and but an ordinary spatula to effect it. Certainly the proceeding is far better than that recommended by the late Sir A. Cooper, and Baron Dupnytren, which is truly a “frightfully painful” process. Fortunately for humanity, we have now an agent of wonderful power, not only in modifying but completely suspending all sensation. Be the operation what it may, the surgeon can now command the patient’s feelings, and render him as entirely unconscious of suffering as though he were dead. Such is the fact, and it is one of vast importance in the practice of medicine and surgery.

Mr. A. C. has suffered for the past three years from the growth of the nail on his left great toe into the flesh. It has at times been exquisitely painful, and had become deeply ulcerated along its inner margin, the flesh rising over the nail, and covering one-third of its surface. He had tried various expedients without success, and wished the nail removed, but dreading the pain, put off from time to time applying to us. We had candidly stated to him some months ago, that the removal of the nail was the only proper remedy. About ten days since, while he was sitting in our office, we remarked to him that we had just procured a bottle of *chloroform*, and if he could now make up his mind to submit to the operation, the nail could be removed without the slightest pain. Upon this assurance he willingly assented to our proposition, and we removed the entire nail on the afternoon of the 22d inst.

Having desired Mr. C. to put off his boot and stocking, we seated him upon the sofa, poured *one drachm of the chloroform* upon the concave side of a piece of bleached sponge, and had it held over his mouth and nose by our assistant. In *fifteen seconds* complete insensibility was produced, during which time we placed our patient’s foot between our knees, and took up a *small steel spatula* belonging to our pocket case. Holding the instrument precisely as though a pencil was to be sharpened, we separated the skin which covers over the root of the nail. Having gained its posterior border, the instrument was carried over towards the instep, the end being beneath the root of the nail. Then, by pushing forward the spatula between the nail and tissues, the evulsion was accomplished with perfect facility. The time occupied in doing this was just ten seconds. As soon as the nail was off, the sponge was removed from the face, and the patient left to recover himself, which he did in ten minutes. He asked how long he had been asleep, and said it seemed to him that *hours* had passed instead of minutes. His *unconsciousness* was as complete as though he

were dead. Not a drachm of blood was lost, nor any pain felt *after* the operation was finished. The wound was dressed with lint and laudanum. Mr. C. having inhaled the chloroform shortly after dinner, the only unpleasant effects produced were sickness of stomach, vomiting twice, and a sensation of languor.

To us the gratification afforded was not less than that of our patient, and we rejoice that an agent is within our reach, so well adapted to accomplish such wonderful results. That chloroform will be safe in *proper* hands we have no reason to doubt, yet we fear that its use will be abused and bad consequences be sure to follow. As an anæsthetic agent, we regard it as greatly superior to ether, and at present but little more expensive. Its taste and smell are quite agreeable.

Our operation was precisely a copy of the one adopted by M. Long, and we can recommend it as decidedly better than any other.

Flushing, L. I., Feb. 26th, 1848.

Case of overdose of Morphia during Labour—Unconscious Delivery—Recovery. By CHAS. FOULKE, M. D., of New Hope. [Communicated in a letter to Prof. GEO. B. WOOD.]

DEAR DOCTOR—The following is the case of overdose of sulphate of morphia I mentioned in my note to you a few days back. I was, on the evening of the 26th of December, called to Mrs. R., of New Hope, aged 16 years, who was suffering from premature labour pains. She had been pregnant eight months. I found her pains had been brought on by a disturbance in the bowels, and proceeded to stop them by the use of morphia. I put in a teacup, one-half grain of morphia, to which I added five teaspoonfuls of water, gave one in the presence of her mother, who was taking charge of her, and directed her to give one teaspoonful every twenty minutes until the pains abated. In mistake I left a bottle of morphia containing two drachms all to one grain, on the table, and when the time for second dose came round, instead of giving the solution I had left, she took a teaspoonful of morphia out of the bottle, put a small quantity of water to it, and proceeded to give the solution until it was all taken, three hours in the administration of it. I afterwards weighed the remainder and found she had taken just $11\frac{1}{2}$ grains in the three hours. Her strange conduct alarmed them, and I was sent for; being from home, I did not reach the house until four hours after she had taken the last dose. I found her, as she had been for some hours, crazy, with three or four holding her in bed; she had had some half-dozen slight convulsions, and during the interval was in this crazy condition.

Her face and lips livid; skin warm and moist; the pulse middling full, not sufficiently so to bleed I thought, and (accordingly abstracted no blood) itching and pricking of the skin intolerable; great contraction of the pupils, almost perfect blindness; little or no consciousness; constantly rubbing the nose, eyes, and face. In this condition she continued for five hours and a half after she had taken the last dose of morphia, and before there was the least tendency to sleep; it now came on and was profound. If left to herself she quickly fell into a state of profound stupor, and lost all consciousness, not breathing more than once in forty-six seconds. Upon examination I found labour was slowly going on; she evinced a slight restlessness about once in twenty minutes; no complaint of pain. The time being so long since she had the poison administered, I hoped but for little benefit from evacuating the stomach. Having no stomach-pump at hand, I adminis-